| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 48 | 4/12/04 |
| FORMALITY REVIEW | Sw | 922 | 04/27/01 |
| RESPONSE FORMALITY REVIEW | | 1091 | 9-17-01 |

## INDEX OF CLAIMS

| | | | | |
|---|---|---|---|---|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| – (Through numeral)... | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | | Date | | | | | | | |
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| Final | Original | | | | | | | | |
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| 5 | 5 | | | | | | | | |
| 6 | 6 | N | | | | | | | |
| 7 | 7 | N | | | | | | | |
| 8 | 8 | | | | | | | | |
| 9 | 9 | N | | | | | | | |
| 10 | 10 | N | | | | | | | |
| 11 | 11 | N | | | | | | | |
| 12 | 12 | | | | | | | | |
| 13 | 13 | | | | | | | | |
| 14 | 14 | | | | | | | | |
| 15 | 15 | N | | | | | | | |
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If more than 150 claims or 10 actions
staple additional sheet here

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